



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.: 09/829,364 Confirmation No. 9690
Applicant: Steven B. Smith TC/A.U.: 3627
Filed: April 9, 2001 Customer No.: 21999
Examiner: Andrew J. Rudy

Title: METHODS AND SYSTEMS FOR JOB-BASED ACCOUNTING

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450


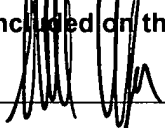
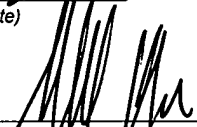
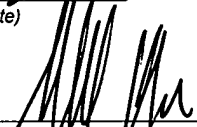
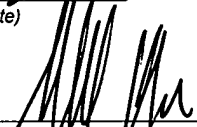
AMENDMENT AND RESPONSE

Sir:

In response to the Office Action of October 19, 2004, the shortened statutory period for response to which ends after January 19, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the list of claims that begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. 9311.16									
Applicant(s): Steven B. Smith													
Application No. 09/829,364	Filing Date April 9, 2001	Examiner Andrew J. Rudy	Customer No. 21999	Group Art Unit 3627	Confirmation No. 9690								
Invention: METHODS AND SYSTEMS FOR JOB-BASED ACCOUNTING													
 COMMISSIONER FOR PATENTS:													
Transmitted herewith is an amendment in the above-identified application.													
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27													
The fee has been calculated and is transmitted as shown below.													
CLAIMS AS AMENDED													
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE								
TOTAL CLAIMS	22 -	20 =	2 x	\$9.00	\$18.00								
INDEP. CLAIMS	2 -	3 =	0 x	\$44.00	\$0.00								
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00								
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$18.00								
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.													
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.													
 _____ Signature			Dated: Nov. 4, 2004										
Michael F. Krieger Attorney for Applicant Registration No. 35,232 KIRTON & McCONKIE 1800 Eagle Gate Tower 60 East South Temple Salt Lake City, Utah 84111 (801) 328-3600			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</td> </tr> <tr> <td style="text-align: center;">Nov. 4, 2004</td> <td style="text-align: center;">(Date)</td> </tr> <tr> <td colspan="2" style="text-align: center;">  Signature of Person Mailing Correspondence Michael F. Krieger </td> </tr> <tr> <td colspan="2" style="text-align: center;"> Typed or Printed Name of Person Mailing Correspondence </td> </tr> </table>			I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on		Nov. 4, 2004	(Date)	 Signature of Person Mailing Correspondence Michael F. Krieger		Typed or Printed Name of Person Mailing Correspondence	
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CC:													